

ATTORNEY OR PARTY WITHOUT ATTORNEY (Name, State Bar number, and address):     <div style="display: flex; justify-content: space-between;"> <div>TELEPHONE NO.:</div> <div>FAX NO. (Optional):</div> </div> <div style="display: flex; justify-content: space-between;"> <div>E-MAIL ADDRESS (Optional):</div> <div></div> </div> <div style="display: flex; justify-content: space-between;"> <div>ATTORNEY FOR (Name):</div> <div></div> </div>	<b>FOR COURT USE ONLY</b>
<b>SUPERIOR COURT OF CALIFORNIA, COUNTY OF</b> STREET ADDRESS: MAILING ADDRESS: CITY AND ZIP CODE: BRANCH NAME:	
ESTATE OF (Name):   <div style="text-align: right;">DECEDENT</div>	
<b>PETITION FOR</b> <div style="display: flex; flex-direction: column; gap: 5px;"> <div><input type="checkbox"/> Probate of Will and for Letters Testamentary</div> <div><input type="checkbox"/> Probate of Will and for Letters of Administration with Will Annexed</div> <div><input type="checkbox"/> Letters of Administration</div> <div><input type="checkbox"/> Letters of Special Administration <input type="checkbox"/> with general powers</div> <div><input type="checkbox"/> Authorization to Administer Under the Independent Administration of Estates Act <input type="checkbox"/> with limited authority</div> </div>	<div>CASE NUMBER:</div> <div>HEARING DATE:</div> <div style="display: flex; justify-content: space-between;"> <div>DEPT.:</div> <div>TIME:</div> </div>

1. Publication will be in (specify name of newspaper):

- a. ☐ Publication requested.
- b. ☐ Publication to be arranged.

2. **Petitioner** (name each):

requests that

- a. ☐ decedent's will and codicils, if any, be admitted to probate.
- b. ☐ (name):  
be appointed
- (1) ☐ executor
- (2) ☐ administrator with will annexed
- (3) ☐ administrator
- (4) ☐ special administrator ☐ with general powers
- and Letters issue upon qualification.
- c. ☐ full ☐ limited authority be granted to administer under the Independent Administration of Estates Act.
- d. (1) ☐ bond not be required for the reasons stated in item 4d.
- (2) ☐ \$ bond be fixed. The bond will be furnished by an admitted surety insurer or as otherwise provided by law. (Specify reasons in Attachment 2 if the amount is different from the maximum required by Prob. Code, § 8482.)
- (3) ☐ \$ in deposits in a blocked account be allowed. Receipts will be filed.  
(Specify institution and location):

3. a. **Estimated value of the estate for filing fee purposes** (Complete in all cases. The estimated value of the estate is the fair market value of the real and personal property of the estate at the date of the decedent's death, without reduction for encumbrances. See Gov. Code, § 26827.):

- |   |   |
|---|---|
| (1) <input type="checkbox"/> Less than \$250,000                              | (6) <input type="checkbox"/> At least \$1.5 million and less than \$2 million   |
| (2) <input type="checkbox"/> At least \$250,000 and less than \$500,000       | (7) <input type="checkbox"/> At least \$2 million and less than \$2.5 million   |
| (3) <input type="checkbox"/> At least \$500,000 and less than \$750,000       | (8) <input type="checkbox"/> At least \$2.5 million and less than \$3.5 million |
| (4) <input type="checkbox"/> At least \$750,000 and less than \$1 million     | (9) <input type="checkbox"/> \$ *   |
| (5) <input type="checkbox"/> At least \$1 million and less than \$1.5 million |   |

\*(For estates of \$3.5 million or more, specify total estimated value of estate.)

- b. ☐ This petition is not the first petition for appointment of a personal representative with general powers filed in this proceeding. The first petition was filed on (date):

ESTATE OF (Name): <div style="border-bottom: 1px solid black; height: 1.2em; width: 100%;"></div>	CASE NUMBER: <div style="border-bottom: 1px solid black; height: 1.2em; width: 100%;"></div>
DECEDENT	

4. a. Decedent died on (date): \_\_\_\_\_ at (place): \_\_\_\_\_
- (1) ☐ a resident of the county named above.
- (2) ☐ a nonresident of California and left an estate in the county named above located at (specify location permitting publication in the newspaper named in item 1): \_\_\_\_\_

b. Street address, city, and county of decedent's residence at time of death (specify): \_\_\_\_\_

**c. Character and estimated value of the property of the estate (complete in all cases):**

- |   |      |  |
|---|------|--|
| (1) Personal property:                        | \$   |  |
| (2) Annual gross income from                  |      |  |
| (a) real property:                            | \$   |  |
| (b) personal property:                        | \$   |  |
| (3) <b>Subtotal</b> (add (1) and (2)):        | \$   |  |
| (4) Gross fair market value of real property: | \$   |  |
| (5) (Less) Encumbrances:                      | \$ ( |  |
| (6) Net value of real property:               | \$   |  |
| (7) <b>Total</b> (add (3) and (6)):           | \$   |  |

- d. (1) ☐ Will waives bond. ☐ Special administrator is the named executor, and the will waives bond.
- (2) ☐ All beneficiaries are adults and have waived bond, and the will does not require a bond.  
(Affix waiver as Attachment 4d(2).)
- (3) ☐ All heirs at law are adults and have waived bond. (Affix waiver as Attachment 4d(3).)
- (4) ☐ Sole personal representative is a corporate fiduciary or an exempt government agency.

- e. (1) ☐ Decedent died intestate.
- (2) ☐ Copy of decedent's will dated: \_\_\_\_\_ ☐ codicil dated (specify for each): \_\_\_\_\_  
are affixed as Attachment 4e(2).  
(Include typed copies of handwritten documents and English translations of foreign-language documents.)

☐ The will and all codicils are self-proving (Prob. Code, § 8220).

**f. Appointment of personal representative (check all applicable boxes):**

- (1) Appointment of executor or administrator with will annexed:
- (a) ☐ Proposed executor is named as executor in the will and consents to act.
- (b) ☐ No executor is named in the will.
- (c) ☐ Proposed personal representative is a nominee of a person entitled to Letters.  
(Affix nomination as Attachment 4f(1)(c).)
- (d) ☐ Other named executors will not act because of ☐ death ☐ declination  
☐ other reasons (specify): \_\_\_\_\_

☐ Continued in Attachment 4f(1)(d).

(2) Appointment of administrator:

- (a) ☐ Petitioner is a person entitled to Letters. (If necessary, explain priority in Attachment 4f(2)(a).)
- (b) ☐ Petitioner is a nominee of a person entitled to Letters. (Affix nomination as Attachment 4f(2)(b).)
- (c) ☐ Petitioner is related to the decedent as (specify): \_\_\_\_\_

(3) ☐ Appointment of special administrator requested. (Specify grounds and requested powers in Attachment 4f(3).)

ESTATE OF (Name): <div style="border-bottom: 1px solid black; height: 1.2em; width: 90%; margin-top: 5px;"></div> <div style="text-align: right; padding-top: 5px;">DECEDENT</div>	CASE NUMBER: <div style="border-bottom: 1px solid black; height: 1.2em; width: 90%; margin-top: 5px;"></div>
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4. g. Proposed personal representative is a  
☐ resident of California.  
☐ nonresident of California (*specify permanent address*):
- ☐ resident of the United States.  
☐ nonresident of the United States.
5. ☐ Decedent's will does not preclude administration of this estate under the Independent Administration of Estates Act.
6. a. Decedent is survived by (*check items (1) or (2), and (3) or (4), and (5) or (6), and (7) or (8)*)
- (1) ☐ spouse.
  - (2) ☐ no spouse as follows:
    - (a) ☐ divorced or never married.
    - (b) ☐ spouse deceased.
  - (3) ☐ registered domestic partner.
  - (4) ☐ no registered domestic partner.  
*(See Fam. Code, § 297.5(c); Prob. Code, §§ 37(b), 6401(c), and 6402.)*
  - (5) ☐ child as follows:
    - (a) ☐ natural or adopted.
    - (b) ☐ natural adopted by a third party.
  - (6) ☐ no child.
  - (7) ☐ issue of a predeceased child.
  - (8) ☐ no issue of a predeceased child.
- b. Decedent ☐ is ☐ is not survived by a stepchild or foster child or children who would have been adopted by decedent but for a legal barrier. (*See Prob. Code, § 6454.*)
7. (*Complete if decedent is survived by (1) a spouse or registered domestic partner but no issue (only a or b apply), or (2) no spouse, registered domestic partner, or issue. (Check the **first** box that applies):*)
- a. ☐ Decedent is survived by a parent or parents who are listed in item 9.
  - b. ☐ Decedent is survived by issue of deceased parents, all of whom are listed in item 9.
  - c. ☐ Decedent is survived by a grandparent or grandparents who are listed in item 9.
  - d. ☐ Decedent is survived by issue of grandparents, all of whom are listed in item 9.
  - e. ☐ Decedent is survived by issue of a predeceased spouse, all of whom are listed in item 9.
  - f. ☐ Decedent is survived by next of kin, all of whom are listed in item 9.
  - g. ☐ Decedent is survived by parents of a predeceased spouse or issue of those parents, if both are predeceased, all of whom are listed in item 9.
  - h. ☐ Decedent is survived by no known next of kin.
8. (*Complete only if no spouse or issue survived decedent.*)
- a. ☐ Decedent had no predeceased spouse.
  - b. ☐ Decedent had a predeceased spouse who
    - (1) ☐ died not more than 15 years before decedent and who owned an interest in **real property** that passed to decedent,
    - (2) ☐ died not more than five years before decedent and who owned **personal property** valued at \$10,000 or more that passed to decedent,  
*(If you checked (1) or (2), check only the **first** box that applies):*
      - (a) ☐ Decedent is survived by issue of a predeceased spouse, all of whom are listed in item 9.
      - (b) ☐ Decedent is survived by a parent or parents of the predeceased spouse who are listed in item 9.
      - (c) ☐ Decedent is survived by issue of a parent of the predeceased spouse, all of whom are listed in item 9.
      - (d) ☐ Decedent is survived by next of kin of the decedent, all of whom are listed in item 9.
      - (e) ☐ Decedent is survived by next of kin of the predeceased spouse, all of whom are listed in item 9.
    - (3) ☐ neither (1) nor (2) apply.

ESTATE OF (Name):  _____	CASE NUMBER:  
DECEDENT	

9. Listed below are the names, relationships to decedent, ages, and addresses, so far as known to or reasonably ascertainable by petitioner, of (1) all persons mentioned in decedent's will or any codicil, whether living or deceased; (2) all persons named or checked in items 2, 6, 7, and 8; and (3) all beneficiaries of a trust named in decedent's will or any codicil in which the trustee and personal representative are the same person.

<u>Name and relationship to decedent</u>	<u>Age</u>	<u>Address</u>
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☐ Continued on Attachment 9.

10. Number of pages attached: \_\_\_\_\_

Date:

_____	▶	_____
(TYPE OR PRINT NAME OF ATTORNEY)		(SIGNATURE OF ATTORNEY)*

\* (Signatures of all petitioners are also required. All petitioners must sign, but the petition may be verified by any one of them (Prob. Code, §§ 1020, 1021; Cal. Rules of Court, rule 7.103).)

I declare under penalty of perjury under the laws of the State of California that the foregoing is true and correct.

Date:

_____	▶	_____
(TYPE OR PRINT NAME OF PETITIONER)		(SIGNATURE OF PETITIONER)

_____	▶	_____
(TYPE OR PRINT NAME OF PETITIONER)		(SIGNATURE OF PETITIONER)

☐ Signatures of additional petitioners follow last attachment.